

Fill in this information to identify your case:

Debtor 1	First Name	Middle Name	Last Name
	ANGIE	D.	VALENTIN
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the: <u>EASTERN</u> District of <u>PENNSYLVANIA</u>			
Case number (If known)	18-17497		

Check if this is:

An amended filing
 A supplement showing postpetition chapter 13 income as of the following date:
03/08/2019
 MM / DD / YYYY

Official Form 106I

Schedule I: Your Income

12/15

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Describe Employment

1. Fill in your employment information.

If you have more than one job, attach a separate page with information about additional employers.

Include part-time, seasonal, or self-employed work.

Occupation may include student or homemaker, if it applies.

Employment status

Debtor 1

Employed
 Not employed

Debtor 2 or non-filing spouse

(DEBTOR IS NOT MARRIED BUT LIVING WITH FIANCEE)
 Employed
 Not employed

Occupation

REGISTERED NURSE

Employer's name

TEMPLE UNIVERSITY HOSPITAL

TEMPLE UNIV. HOSP.

Employer's address

2450 W. HUNTING PARK AVE.

Number Street

Number Street

PHILADELPHIA, PA 19129

City State ZIP Code

City State ZIP Code

How long employed there?

10 YEARS

Part 2: Give Details About Monthly Income

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

2. List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be.

3. Estimate and list monthly overtime pay.

4. Calculate gross income. Add line 2 + line 3.

For Debtor 1

2. \$ 9,616.54

For Debtor 2 or non-filing spouse

\$ _____

3. +\$ 0.00

+\$ _____

4. \$ 9,616.54

\$ _____

Debtor 1 ANGIE D. VALENTIN Case number (if known) 18-17497

First Name Middle Name

Last Name

	<u>For Debtor 1</u>	<u>For Debtor 2 or non-filing spouse</u>
Copy line 4 here.....	→ 4. \$ 9,616.54	\$ _____
5. List all payroll deductions:		
5a. Tax, Medicare, and Social Security deductions	5a. \$ 2,670.90	\$ _____
5b. Mandatory contributions for retirement plans	5b. \$ 0.00	\$ _____
5c. Voluntary contributions for retirement plans	5c. \$ 0.00	\$ _____
5d. Required repayments of retirement fund loans	5d. \$ 0.00	\$ _____
5e. Insurance	5e. \$ 659.97	\$ _____
5f. Domestic support obligations	5f. \$ 0.00	\$ _____
5g. Union dues	5g. \$ 66.81	\$ _____
5h. Other deductions. Specify: _____	5h. + \$ 0.00	+ \$ _____
6. Add the payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e + 5f + 5g + 5h.	6. \$ 3,397.68	\$ _____
7. Calculate total monthly take-home pay. Subtract line 6 from line 4.	7. \$ 6,218.86	\$ _____
8. List all other income regularly received:		
8a. Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a. \$ _____	\$ _____
8b. Interest and dividends	8b. \$ _____	\$ _____
8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c. \$ _____	\$ _____
8d. Unemployment compensation	8d. \$ _____	\$ _____
8e. Social Security	8e. \$ _____	\$ _____
8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: _____	8f. \$ _____	\$ _____
8g. Pension or retirement income	8g. \$ _____	\$ _____
8h. Other monthly income. Specify: _____	8h. + \$ _____	+ \$ _____
9. Add all other income. Add lines 8a + 8b + 8c + 8d + 8e + 8f + 8g + 8h.	9. \$ 0.00	\$ _____
10. Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10. \$ 6,218.86	+ \$ _____ = \$ _____
11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: <u>NETS \$2,253.00 FROM FIANCÉE, WITH WHOM SHE LIVES (FATHER OF MARIANO)</u>		
	11. + \$ 2,253.00	\$ 8,471.86
12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the <i>Summary of Your Assets and Liabilities and Certain Statistical Information</i> , if it applies		
	12. \$ 8,471.86	Combined monthly income
13. Do you expect an increase or decrease within the year after you file this form?		
<input type="checkbox"/> No.		
<input checked="" type="checkbox"/> Yes. Explain: <u>DEBTOR USUALLY RECEIVES A 1.5% PAY INCREASE DURING NOVEMBER.</u>		

Fill in this information to identify your case:

Debtor 1	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the: <u>EASTERN</u> District of <u>PENNSYLVANIA</u>			
Case number (if known)	18-17497		

Check if this is:

An amended filing
 A supplement showing postpetition chapter 13 expenses as of the following date:
03/08/2019
 MM / DD / YYYY

Official Form 106J

Schedule J: Your Expenses

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Describe Your Household

1. Is this a joint case?

No. Go to line 2.
 Yes. Does Debtor 2 live in a separate household?
 No
 Yes. Debtor 2 must file Official Form 106J-2, Expenses for Separate Household of Debtor 2.

2. Do you have dependents?

Do not list Debtor 1 and Debtor 2.

Do not state the dependents' names.

No

Yes. Fill out this information for each dependent.....

Dependent's relationship to Debtor 1 or Debtor 2

Dependent's age

Does dependent live with you?

(SON) JONATHAN CLAUDIO 14

No
 Yes

(DAUGHTER) ANGELICA CLAUDIO 17

No
 Yes

(DAUGHTER) CAITLIN CLAUDIO 20

No
 Yes

(SON) MARIANO VASQUEZ, III 6 MONTHS

No
 Yes

No
 Yes

No
 Yes

No
 Yes

3. Do your expenses include expenses of people other than yourself and your dependents?

No

Yes

Part 2: Estimate Your Ongoing Monthly Expenses

Estimate your expenses as of your bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental Schedule J, check the box at the top of the form and fill in the applicable date.

Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on Schedule I: Your Income (Official Form 106I).

4. The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot.

Your expenses

4. \$ 1,330.00

If not included in line 4:

4a. Real estate taxes
 4b. Property, homeowner's, or renter's insurance
 4c. Home maintenance, repair, and upkeep expenses
 4d. Homeowner's association or condominium dues

4a. \$ 0.00
4b. \$ 0.00
4c. \$ 150.00
4d. \$ 0.00

Debtor 1 ANGIE D. VALENTINCase number (if known) 18-17497

		Your expenses
5. Additional mortgage payments for your residence , such as home equity loans HAS BEEN DOUBLING UP MORTGAG PAYMENTS PER LOAN MODIFICATION		5. \$ <u>1,330.00</u>
6. Utilities:		
6a.	Electricity, heat, natural gas	6a. \$ <u>200.00</u>
6b.	Water, sewer, garbage collection	6b. \$ <u>90.00</u>
6c.	Telephone, cell phone, Internet, satellite, and cable services	6c. \$ <u>110.00</u>
6d.	Other. Specify: _____	6d. \$ <u>0.00</u>
7. Food and housekeeping supplies		7. \$ <u>600.00</u>
8. Childcare and children's education costs		8. \$ <u>40.00</u>
9. Clothing, laundry, and dry cleaning		9. \$ <u>40.00</u>
10. Personal care products and services		10. \$ <u>60.00</u>
11. Medical and dental expenses		11. \$ <u>20.00</u>
12. Transportation. Include gas, maintenance, bus or train fare. Do not include car payments.		12. \$ <u>90.00</u>
13. Entertainment, clubs, recreation, newspapers, magazines, and books		13. \$ <u>50.00</u>
14. Charitable contributions and religious donations		14. \$ <u>20.00</u>
15. Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20.		
15a.	Life insurance	15a. \$ <u>0.00</u>
15b.	Health insurance	15b. \$ <u>0.00</u>
15c.	Vehicle insurance (VEHICLE IS OWNED BY ORLANDO APONTE, DEBTOR HAS USE OF THE VEHICLE)	15c. \$ <u>350.00</u>
15d.	Other insurance. Specify: _____	15d. \$ <u>0.00</u>
16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: _____		16. \$ <u>0.00</u>
17. Installment or lease payments:		
17a.	Car payments for Vehicle 1	17a. \$ <u>400.00</u>
17b.	Car payments for Vehicle 2	17b. \$ <u>0.00</u>
17c.	Other. Specify: _____	17c. \$ <u>0.00</u>
17d.	Other. Specify: _____	17d. \$ <u>0.00</u>
18. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, <i>Schedule I, Your Income</i> (Official Form 106I).		18. \$ <u>0.00</u>
19. Other payments you make to support others who do not live with you. Specify: _____		19. \$ <u>0.00</u>
20. Other real property expenses not included in lines 4 or 5 of this form or on <i>Schedule I: Your Income</i>.		
20a.	Mortgages on other property	20a. \$ <u>0.00</u>
20b.	Real estate taxes	20b. \$ <u>0.00</u>
20c.	Property, homeowner's, or renter's insurance	20c. \$ <u>0.00</u>
20d.	Maintenance, repair, and upkeep expenses	20d. \$ <u>0.00</u>
20e.	Homeowner's association or condominium dues	20e. \$ <u>0.00</u>

Debtor 1 ANGIE D. VALENTIN

Case number (if known) 18-17497

21. Other. Specify: _____

21. +\$ _____

22. Calculate your monthly expenses.

22a. Add lines 4 through 21.

22a. \$ 4,880.00

22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2

22b. \$ 0.00

22c. Add line 22a and 22b. The result is your monthly expenses.

22c. \$ 4,880.00

23. Calculate your monthly net income.

23a. Copy line 12 (your combined monthly income) from Schedule I.

23a. \$ 8,471.86

23b. Copy your monthly expenses from line 22c above.

23b. - \$ 4,880.00

23c. Subtract your monthly expenses from your monthly income.

The result is your monthly net income.

23c. \$ 3,591.86

24. Do you expect an increase or decrease in your expenses within the year after you file this form?

For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage?

No.

Yes.

Explain here: